PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450 (703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 22195 7590 12/15/2003 **HUMAN GENOME SCIENCES** Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile 9410 KEY WEST AVENUE ROCKVILLE, MD 20850 1 7 2004 transmitted to the USPTO, on the date indicated below. (Depositor's name (Signature (Date FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO APPLICATION NO. **GUO-LIANG YU** 09/333.966 06/16/1999 1488.0310005 4780 TITLE OF INVENTION: DEATH DOMAIN CONTAINING RECEPTORS APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE \$1330 \$1630 03/15/2004 nonprovisional NO \$300 ART UNIT CLASS-SUBCLASS **EXAMINER** ULM, JOHN D 1646 514-002000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the HUMAN GENOME SCIENCES, names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single $\ensuremath{\square}$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. INC. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. Inclusion of assignce data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) HUMAN GENOME SCIENCES, INC. ROCKVILLE, MD corporation or other private group entity government Please check the appropriate assignee category or categories (will not be printed on the patent); individual 4a. The following fec(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. A Publication Fee X) The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number __08_3425_______(enclose an extra copy of this form). Advance Order - # of Copies _ Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Authorized Signature) (Date) 00000174 083425 09333966 02/19/2004 HLE444 17 Florian Reg. UNo. Hyme] 1330.00 DA 01 FC:1501 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone 02 FC:1504 300.00 DA other than the applicant; a registered attorney or agent; or the assignee or oth interest as shown by the records of the United States Patent and Trademark Office. or other party in 03 FC:8001 15.00 DA

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. Alexandria, Virginia 22313-1450. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)

FEE	TR	AN	SMI	TT	AL
	for	FY	200	4	

Effective 10/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known				
Application Number	09/333,966-Conf. #4780			
Filing Date	June 16, 1999			
First Named Inventor	Guo-Liang Yu			
Examiner Name	J. D. Ulm			
Art Unit	1646			
Attorney Docket No	PF267D1			

TOTAL AMOUNT OF PAYMENT (\$) 1,645.00	Attorney Docket No. PF267D1						
METHOD OF PAYMENT (check all that apply)				FEE	CALCU	LATION (continued)	
Check Credit Money Order Other None	3. /	ADDITIO	ONAL	FEES			*
X Deposit Account:							
Deposit		Large Entity Small Entity Fee Fee Fee Fee					
Account Number 08-3425	Code		Code			Fee Description	Fee Paid
Deposit Account Human Genome Sciences, Inc.	1051	130	2051	65	Surcharge	e - late filing fee or oath	
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	e – late provisional filing fee or cover	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		sh specification	
Charge any additional tools) during the pendency of this	1812		1812		•	request for ex parte reexamination	
application		-	1		-	request for ex pane reexamination ag publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920°	Examiner	action	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requestin Examiner	g publication of SIR after action	
FEE CALCULATION	1251	110	2251	55	Extension	for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension	for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension	for reply within third month	
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply within fourth month	
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension	for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of	Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a bri	ief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request fo	or oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to	institute a public use proceeding	
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to	revive – unavoidable	
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665	Petition to	revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2501	665	Utility issu	e fee (or reissue)	1,330.00
Extra Fee from Claims below Fee Paid	1502	480	2502	240	Design iss	sue fee	
Total Claims -20** = x =	1503	640	2503	320	Plant issue	e fee	
Independent -3** = x = =	1460	130	1460	130	Petitions to	o the Commissioner	
Multiple Dependent =	1807	50	1807	50	Processing	g fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submissio	on of Information Disclosure Stmt	
Fee Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40		each patent assignment per times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a su	bmission after final rejection	
1201 86 2201 43 Independent claims in excess of 3	"""	-			(37 CFR 1	1 "	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		additional invention to be (37CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	Request fo	or Continued Examination (RCE)	
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900		or expedited examination n application	
and over original patent		Other fee (specify)		8001; 1504	Printed copy of patent w/o color (5@\$3.00); Publication fee for early, voluntary, or normal publication		315.00
SUBTOTAL (2) (\$) 0.00 *Reduce				iling Fee		SUBTOTAL (3) (\$)	1,645.00
**or number previously paid, if greater, For Reissues, see above							

SUBMITTED BY	(Complete (if applicable))				
Name (Print/Type) Lin J. Hymel	Registration No. (Attorney/Agent) 45	5,414 Telep	hoпе (301) 251-6015		
Signature L. L. M.		Date	17 February 2004		



Docket No.: PF267D1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Yu et al.

Allowed: December 15, 2003

Application No.: 09/333,966

Confirmation No.: 4780

Filed: June 16, 1999

Art Unit: 1646

For: Death Domain Containing Receptors

Examiner: J. D. Ulm

ISSUE FEE TRANSMITTAL LETTER

MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance and Fee(s) Due mailed December 15, 2003, Applicants submit herewith:

- 1. a Fee Transmittal Sheet, with appropriate fee(s); and
- 2. Part B Fee(s) Transmittal (PTOL-85), with appropriate fee(s).

The U.S. Patent and Trademark Office is hereby authorized to charge any deficiency in the fees filed, or credit any overpayment, to our Deposit Account No. 08-3425.

Dated: 17 Flbriday 2004

Respectfully submitted,

Lin J. Hymel

Registration No.: 45,414

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